

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.  
**107517536**

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	SEA	IND.	SEA	IND.	SEA
1			/			
2			/			
3			/			
4			/			
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50						
TOTAL IND.			2			
TOTAL SEA			8			
TOTAL CLAIMS			10			

	I		II		III	
	IND.	SEA	IND.	SEA	IND.	SEA
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TOTAL IND.						
TOTAL SEA						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS